

10/584 920

IAP11 Rec'd PCT/PTO 29 JUN 2006

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF?): No

Number of Copies of CRF::

Title:: VALVE ASSEMBLY

Attorney Docket Number:: 1033136-000536

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 15

Small Entity?: Yes

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Philip

Middle Name:: J.

Family Name:: SIMPSON

Name Suffix::

City of Residence:: Escondido

State or Province of Residence:: California

Country of Residence:: U.S.A.

Street of Mailing Address:: 3185 Pioneer Place

City of Mailing Address:: Escondido

State or Province of Mailing Address:: California

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 92025

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Walter  
Middle Name:: D.  
Family Name:: GILLESPIE

Name Suffix::

City of Residence:: San Diego

State or Province of Residence:: California

Country of Residence:: U.S.A.

Street of Mailing Address:: 1327 Pacific Beach Drive, #11

City of Mailing Address:: San Diego

State or Province of Mailing Address:: California

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 92109

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: David

Middle Name:: G.

Family Name:: MATSUURA

Name Suffix::

City of Residence:: Encinitas

State or Province of Residence:: California

Country of Residence:: U.S.A.

Street of Mailing Address:: 859 Summersong Court

City of Mailing Address:: Encinitas  
State or Province of Mailing Address:: California  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 92024

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/US2004/042723	12/21/2004
This Application	Claiming the benefit under 35 USC 119 (e)	60/532,916	12/30/2003

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
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## **Assignee Information**

Assignee Name:: VASOGEN IRELAND LIMITED

Street of Mailing Address:: Shannon Airport House

City of Mailing Address:: Shannon

State or Province of Mailing Address:: County Clare

Country of Mailing Address:: Ireland

Postal or Zip Code of Mailing Address::